



4/15/03
 Commissioner for Patents
 Washington, DC 20231
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CONFIRMATION NO. 2651

Bib Data Sheet

SERIAL NUMBER 10/072,728	FILING DATE 02/07/2002 RULE	CLASS 345	GROUP ART UNIT 2675	ATTORNEY DOCKET NO. IMM043E
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APPLICANTS

Chester L. Schuler, Sudbury, MA;
 Seth M. Haberman, New York, NY;

**** CONTINUING DATA *******

This application is a CON of 09/253,392 02/19/1999 ABN which is a CON of 08/585,198 01/11/1996 PAT 5,889,670 which is a CIP of 08/434,176 05/03/1995 PAT 5,559,412 which is a CON of 08/076,344 06/11/1993 PAT 5,414,337 which is a CIP of 07/783,635 10/24/1991 PAT 5,220,260 *

(*)Data provided by applicant is not consistent with PTO records.

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 03/01/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <i>ML</i>	STATE OR COUNTRY MA	SHEETS DRAWING 13	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>ML</i> Allowance				
Verified and Acknowledged	<i>ML</i> Examiner's Signature	Initials			

ADDRESS

22903

TITLE

Interface device with tactile responsiveness

FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2651

SERIAL NUMBER 10/072,728	FILING DATE 02/07/2002 RULE	CLASS 700	GROUP ART UNIT 2121	ATTORNEY DOCKET NO. IMM043E
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APPLICANTS

Chester L. Schuler, Sudbury, MA;
Seth M. Haberman, New York, NY;

**** CONTINUING DATA *******

THIS APPLICATION IS A CON OF 09/253,392 02/19/1999
WHICH IS A CON OF 08/585,198 01/11/1996 PAT 5,889,670
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35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

James R. Riegel
IMMERSION CORPORATION
801 Fox Lane
San Jose ,CA 95131

TITLE

Interface device with tactile responsiveness

FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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